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|  | OFFICE USE ONLY |
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|  |  |
| WA Register of Developmental AnomaliesKing Edward Memorial HospitalPO Box 134SUBIACO WA 6904 |
| **Western Australian Register of Developmental Anomalies****Birth Defects Notification Card****CONFIDENTIAL** |
|  |  |
| Surname |       | Forenames |       |
| Address |       | Postcode |       |
|  |
| Mothers Details | Fathers Details |
| Surname |       | Surname |       |
| Forenames |       | Forenames |       |
| Maiden Name |       | URN |       |
| URN |       | DOB |       |
| DOB |       |  |
| Parents aware of notification to WARDA | [ ]  Y [ ]  N |
| **This space has been intentionally left blank** |

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|  |
| DOB |       | Public Hospital URN |       |
| Sex | [ ]  M [ ]  F | [ ]  Live Birth [ ]  Still Birth [ ]  Other |       |
| Race | [ ]  Aboriginal [ ]  Non Aboriginal | Plurality | [ ]  Single Birth [ ]  Multiple Birth |
| Gestation |       | Birth Weight |       |
| Hospital of birth |       |
| If deceased | Date of death |       |  |
| Post Mortem | [ ]  Y [ ]  N | If Y, where |       |
| PLEASE LIST ALL ANOMALIES |
| Anomaly | Age at Diagnosis | Office Use Only |
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| Doctor(s) in charge of care |       |
| Notified By |       | Date |       |
| Address |       |
|  |
| Has this child been referred to any other agencies, hospitals or doctors? Please list. |
|       |
| Further comments |
|       |